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**Please type a plus sign (+) inside this box.**

<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b> <i>(use as many sheets as necessary)</i>		<i>Complete if Known</i>	
		Application Number	
		Filing Date	
		First Named Inventor	ROBERT J. HIGGINS
		Group Art Unit	
Examiner Name			
Sheet	1	of	
		Attorney Docket No.	CM06374J

#### OTHER PRIOR ART - NON PATENT LITERATURE DOCUMENTS

Examiner Signature		Date Considered	6-17-06
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EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation, if not in conformance and not considered. Include copy of this form with next communication to applicant.

**\* Unique citation designation number. \*Applicant is to place a check mark here if English Language Translation is attached.**